



**University of Gondar**

**College of Medicine and Health Sciences**

**Institute of Public Health**

**Department of Public Health Officer**

Knowledge and Attitude of Female High School Students towards Contraceptive  
in Dabat District, Northwest Ethiopia, 2015.

**Investigators:**

**Abay Melak, Abebaw Tesfa, Abeselom Ayele, Abraraw Molla, Abrham Mengistu**

**Advisors:**

1. Mr. Ejigu Gebeye (MPH)
2. Mr. Yargale Anemute (BSc)

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## **ACRONYMS**

|      |                                    |
|------|------------------------------------|
| EC   | Emergency Contraceptive            |
| IUCD | Intra Uterine Contraceptive Device |
| STI  | Sexually Transmitted Infections    |
| RH   | Reproductive Health                |

## ABSTRACT

**Background:** Young and unmarried women constitute a high-risk group for unplanned pregnancies and unsafe Abortions. It has been estimated that widespread use of emergency contraception may significantly reduce Abortion-related morbidity and mortality.

**Objective:** The aim of this research was to assess Knowledge and attitude of Contraceptives use for prevention of unwanted pregnancy among female high school students in Dabat northwest Gondar, Ethiopia.

**Methods:** A Cross sectional study was conducted and the data was collected using standardized questionnaire with a total of 1370 sample size. Was collected our data by using simple random sampling technique and the result was analyzed by using SPSS version 20 software package.

**Result:** According to this study 182 (55.2%) of respondents has a good knowledge about contraceptive and 148 (44.8%) have poor knowledge about contraceptive and also 92 (27.9%) have positive attitude towards the use of contraceptive and most of the participants 205 (62.1%) preferred inject able contraceptive. The result was the same for most of our independent variables this shows as there is no association between the dependant and independent variables.

**Conclusion and recommendation:** In generally most of Dabat district high school students have good knowledge and attitude about the use of contraceptive for prevention of unwanted pregnancy but for more good result the school administration, the government and the media is better to focus on this issues.

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# **1. INTRODUCTION**

## **1.1. Back ground**

Contraception is a birth control by using various devices, drugs, agents, sexual practices or surgical procedures to prevent conception or impregnation (pregnancy).contraception helps women if and when they want to have a baby. Contraception involves one or more actions, devices, sexual practices or medications followed to intentionally prevent or reduce the like hood of pregnancy or child birth. The three main routes of birth control to prevent or end pregnancy includes contraception (the prevention of fertilization the ovum by sperm cells), contraception (prevention of the fertilization egg from implantation-morning after –pill), and the chemical or surgical induction of abortion of the developing embryo (1).

We can prevent unwanted pregnancy by using different contraceptive methods. Such as oral contraceptive pill, IUCD, sterilization (permanent), and other natural contraceptive methods. Among these the only contraceptive methods which prevents pregnancy and STI is condom (1).

Ever since humans became aware of the relationship between intercourse and pregnancy, they have searched for a method that prevents conception .Petri Papyrus (circa 1850B.C) is believed to contain the earliest medical prescription for contraception paste like substances contain crocodile dung as apessary. Hippocrates (460-377B.C) described in a number of technique for contraception in his Book on the nature of women, including coitus interrupts and use finger stowage out the vagina (2).

## **1.2. Statement of the problem**

Many contraceptive users do not have sufficient knowledge of contraceptive methods and services. Much information comes from the media unfortunately as far as contraception is concerned, the news usually (although not inevitably) bad. There are a number of reasons why this should the case. First contraception is inextricably associated with sexuality. Second most contraceptive users are young and healthy, and using a product of prevents unintentional pregnancy rather than treat disease (2).

Young women are at the greatest risk of unintended pregnancy because they are unlikely to see a family planning provider before or immediately after sexual activity. Therefore preventing unintended pregnancy among them is the important concern (3).

Until 1990s,contraception and family planning were associated with fears of eugenic ideology and population control, which narrowed the scope of behavioral change, communication ,and distribution of contraceptive devices(4).

Increasing unintended pregnancy and unsafe method of abortion are of great concern in Ethiopia. Some pregnancies continue to be terminated, legally or illegally .This is revealed through the escalating number of women aged less than 18 years old admitted for delivery and termination of unwanted and unplanned pregnancies in hospitals irrespective of free contraceptive services. It is therefore necessary to assess and determines the knowledge, attitude, and practice of contraceptive use for prevention of unwanted pregnancy and its consequence.

### **1.3. Literature review**

A cross sectional study done in secondary Schools in Dar-es-salaam region. A total of 395 students participated in the study. Out of 395 participants 390 had attained menarche and 5 had not. About 87% of respondents were aware of teenage pregnancy prevailing in school girls. While 1.3% said they did not know (5).

A descriptive study, using a pre-tested, self-administered semi-structured questionnaire was used to assess the knowledge, attitude and practice of contraception among male and female public secondary school students in Ekpoma. The study population consisted of male and female junior secondary III (JS III) and senior secondary III (SS III) school students in Ekpoma aged 12-24 years. In all 1000 male and 1000 female students were recruited for the study. Data obtained were analysed by sex and age. A total of 690 and 814 questionnaires were returned in good order for males and females respectively. Analysis of data obtained showed that 398 (57.7%) and 216 (26.5%) male and female students respectively were sexually active as at the time of this study. 68 (17.0%) of the male population had their first sexual intercourse at 9 years. Analysis also showed that 292 (42.3%) and 492 (60%) males and females respectively had good knowledge of contraception while 206 (29.9%) and 122 (15%) males and females had no knowledge of contraception. Parents (25.5%), friends (17%), books and magazines (16.2%) and internet (10.7%) were the main sources of information about sex and contraception. Condom was the major available contraceptive for the males while Andrew liver salt (29%), oral pills (10.3%), 7



up (7.4%) were the used by the females. About 40% of the total sampled population believed contraception is not safe (6).

A cross sectional study was conducted among 366 female students at Atse Yohanesse preparatory school from January to May 2013. A stratified random sampling technique was used to select study participants. In this study, about 90.7% of the respondents had heard about emergency contraceptives. The major sources of information were mass media, club in school and friends. About 277 (75.7%) of the students had good knowledge about EC. The older age was significantly associated with the students' awareness. The 229 of respondents had a positive attitude towards EC. Age and ethnic group were significantly associated with the students' attitude towards EC. Among those respondents who used contraceptives, 60.5% of them responded to use EC. About two-third (67.4%) of ever users of EC had good knowledge of the correct time of taking EC after unprotected sexual intercourse (7).

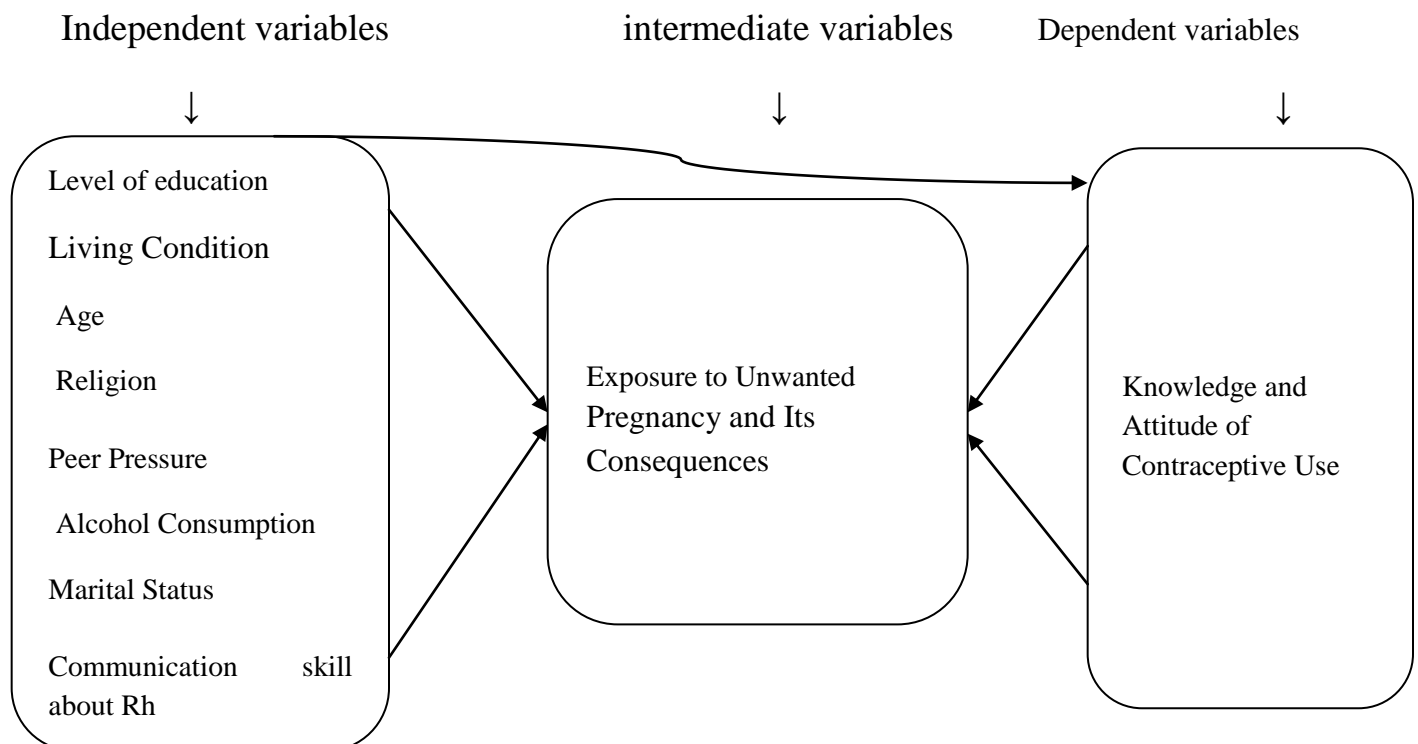
A descriptive cross sectional survey was conducted among 352 sampled female college students of Dessie, Ethiopia from June 4 to June 5/2012. Self-administered questionnaire was used to collect the data. Data was entered into a computer using Microsoft Excel 2007 and analyzed using SPSS version 16.0 statistical software and Binary logistic regression analyses are used to measure the associations. The age of students ranged from 18 to 25 years. Of the total respondents 36.6% ever had sexual experience, 53.3% know at least one regular modern contraceptive method, 69.9% heard about emergency contraceptives (EC) but, only 33.9 % had good knowledge about EC and 15.4% of them had ever used it(8).

A cross-sectional institution-based study was conducted from March 1st to 5th 2010 among 407 female students that were selected by using a stratified sampling technique. One hundred seventy three (42.5%) of the respondents said that they heard about emergency contraceptive. Of those who mentioned pills as an emergency contraceptive method, 26.4% correctly identified 72 hours as the time limit for use of the method. The summary index for knowledge disclosed that 21.9% had good knowledge about EC. Though 50% of students had positive attitude towards EC, 11 (2.7%) of the total students had used emergency contraception. EC use was significantly higher among students who were married and among students who have good (9).

A study which was conducted in Bahir Dar 2003 from 234 female grade 9, 10 and 11 students from Tana haik and Ghion senior secondary schools, 88.5% of respondents said they had heard of at least one method of contraception. The pill was the most reported method (91.5%), followed by condom (54.8%) injectable (32.8%), rhythm (25%) (10).

## 1.4. Conceptual Frame Work

Conceptual frame work is a model that determines what questions need to be answered by the person conducting the research, as well as empirical procedures are to be used as an instrument when answering these questions based up on the literature review above in the study of the socio demographic exposure to different variables, knowledge and attitude of contraceptive and exposure to unwanted pregnancy and its consequences as intermediate variables. Socio demographic factors, such as age, marital status, level of education, exposure to different media and communication about reproductive health material.



### **1.5. Significance of the Study**

This study was to assess the knowledge and attitude of Contraceptives use for prevention of unwanted pregnancy among female high school students. Knowledge and attitude survey is a representative study of a specific population to collect information on what is known, believed and done in relation to a particular topic in this case, contraceptive.

## **2. Objectives**

### **2.1. General Objective**

The aim of this research is to assess the level of knowledge and attitude of contraceptives use for prevention of unwanted pregnancy among female high school students Dabat District, Northwest Ethiopia.

### **2.2. Specific Objectives**

- To determine the level of knowledge of Contraceptives use for prevention of unwanted pregnancy among female high school students.
- To determine the level of attitude of Contraceptives use for prevention of unwanted pregnancy among female high school students

### **3. Methods and materials**

#### **3.1. Study Design**

A cross sectional study was conducted to assess the level of knowledge and attitude of contraceptive use for prevention of unwanted pregnancy in Dabat District high school, Northwest Ethiopia.

#### **3.2. Study area and period**

The study was conducted from March 1 to May 30 at Dabat high school. In Dabat town which is found in North west Gondar Administrated Zone, Amhara national regional state, which is about 80 km north of Gondar city with 253 km away from the regional capital Bahir Dar and about 821 km from Addis Ababa, the capital city of Ethiopia. It is 2602 meter above sea level. The town has 3 kebeles with the total population of 145,509 lives in it. The town has one district debark hospital and one health center.

#### **3.3. Target population**

The target population was representative of high school female student members age  $\geq 15$  years.

#### **3.4. Study population**

The study population was females who are learning In Dabat secondary school.

#### **3.5. Inclusion and exclusion criteria**

##### **3.5.1. Inclusion criteria**

All female students above 15 year age who are learning in Dabat high school regardless of the duration was included.

#### **3.6. Study variable**

##### **3.6.1. Dependent variable**

- Knowledge
- Attitude

##### **3.6.2. Independent variable**

- Age
- Religion
- Marital status
- Media

- Living condition
- Level of education

### 3.7. Operational definitions

**Knowledge-** Those female students who score mean and above the mean of the questionnaire were considered as Knowledgeable, whereas female students who score below the mean of the questionnaire were considered as having poor knowledge.

**Attitude-** Those female students who score mean and above the mean of the questionnaire were considered as having positive attitude, whereas female students who score below the mean of the questionnaire were considered as having negative attitude.

### 3.8. Sample size and sampling procedure

A simple random sampling technique was used to select the study unit. This was done after collecting the sample frame from Dabat secondary school.

The sample size was determined using confidence level of 95% ( $z=1.96$ ) estimate of proportion towards knowledge and attitude of contraceptive as  $P=0.5$  and marginal error as 5% ( $w=0.05$ ).

$$n_i = \frac{z^2 \times p \times (1-p)}{w^2}$$

Where  $n_i$  = initial sample size

$z$  = critical value of 95% confidence interval

$p$  = estimate proportion of population

$w$  = marginal error

$$n_i = (1.92)^2 \times 0.5 \times 1.05 / (0.05) = 384$$

Since the population size (number of female high school student in Dabat) less than 10000 which is 1370 we use formula

$$n_f = n_i / (1 + n_i/N) \text{ where } n_i = \text{initial sample size}$$

nf = final sample size

N = total population

$$Nf = 384 / (1 + 384/1370) = 300$$

Contingency of non respondents as 10% =  $10 \times 300/100 = 30$

Sample size = Nf + contingency which is  $300 + 30 = 330$

### **3.9. Data quality control**

The data was collected by using self-administered questionnaire which was initially prepared in English and then later translated into Amharic. The questionnaire has three parts; the socio-demographic information, knowledge and attitude towards the use of contraception.

### **3.10. Data analysis and interpretation**

The collected data was cleaned, entered and analyzed by SPSS version 20 software package. Data cleaning was carried out by running frequency of each categorical variable and cross tabulation of different categorical variables. Descriptive results were summarized as percentage, means and standard deviations; and presented in table. Each of the outcome variables was computed with each independent variable.

### **3.11. Ethical consideration**

The ethical clearance and approval was obtained from the institute of public health, college of medicine and health science, university of Gondar. The permission was obtained from the concerned bodies of Dabat secondary school. The willingness of respondents was asked and the study conducted after checking their voluntariness. The students were approached after having enough information about their culture, beliefs and norms in order to have a cooperative study.

### **3.12. Dissemination of the results**

The finding will be disseminated to university of Gondar students and staffs as well as the concerned body of Dabat high school.

## **4. Results**

### **4.1.Socio demographic**

There were 330 female high school students in the study group and majority of them 303 (91.8%) were in the age group between 15-18 and about 309(93.6%) of them were orthodox, 12(3.6%) were Muslim. Among the study group 180 (54.4%) were grade 10 and 305(92.4%) of them were unmarried, 243(73.6%) live their mother and father. most of the study participants mother and father are illiterate with 187(56.7%), 109(33%) respectively and about 105(31.8) have monthly income of 200-400 birr (**see Table 1**).



**Table1. Socio demographic result of respondents in Dabat high school June, 2015**

| <b>Variable</b>           |  | <b>Frequency</b> | <b>Percent %</b> |
|---------------------------|--|------------------|------------------|
| <b>Age</b>                | 15-18                                  | 303              | 91.8             |
|                           | >18                                    | 27               | 8.2              |
| <b>Religion</b>           | Orthodox                               | 309              | 93.6             |
|                           | Muslim                                 | 12               | 3.6              |
|                           | Protestant                             | 6                | 1.8              |
|                           | Other*                                 | 3                | 0.9              |
|                           | Catholic<br>Jioba witness<br>Adventist |                  |                  |
| <b>Educational status</b> | Grade 9                                | 150              | 45.5             |
|                           | Grade 10                               | 180              | 54.5             |
| <b>Marital status</b>     | Unmarried                              | 305              | 92.4             |
|                           | Married                                | 16               | 4.8              |
|                           | Divorced                               | 3                | 0.9              |
|                           | Separated                              | 6                | 1.8              |
|                           | With whom you are living?              |                  |                  |
|                           | Father and mother                      | 243              | 73.6             |
|                           | Friend                                 | 52               | 15.8             |
|                           | Alone                                  | 24               | 7.3              |
|                           | Other*                                 | 11               | 3.3              |
|                           | Family relatives                       |                  |                  |
| <b>Mother status</b>      | education                              |                  |                  |
|                           | Illiterate                             | 187              | 56.7             |
|                           | Can read and write                     | 126              | 38.2             |
|                           | Primary and secondary                  | 8                | 2.4              |
|                           | Other*                                 | 9                | 2.7              |
| <b>Father status</b>      | education                              |                  |                  |
|                           | Illiterate                             | 109              | 33               |
|                           | Can read and write                     | 196              | 59.4             |
|                           | Primary and secondary                  | 12               | 3.6              |
|                           | Other                                  | 13               | 3.9              |
| <b>Family income</b>      | 200-400                                | 105              | 31.8             |
|                           | 400-600                                | 60               | 18.2             |
|                           | 600-800                                | 69               | 20.9             |
|                           | >1000                                  | 96               | 29.1             |

#### **4.2. Knowledge result**

Of 330 study participants 288(87.3%) have heard about contraceptive. Majority of them 153(53.4%) obtained information from the health center. Most of them 257(77%) were know about injectable contraceptive. In the study group 191(57.9%) didn't know about emergency contraceptive. And among the participants in the study group 166(50.3%) knew about condom which prevents STI(see table 2)

**Table 2.knowledge result of respondent in Dabat high school June 2015**

| <b>Variable</b>  | <b>Category</b> | <b>Frequency</b> | <b>Percent %</b> |
|--|-----------------|------------------|------------------|
| <b>ever heard of contraceptive</b>                     | Yes             | 288              | 87.3             |
|  | No              | 42               | 12.7             |
|  | Books           | 23               | 7                |
| <b>From where</b>                                      | Mass media      | 36               | 10               |
|  | Health worker   | 153              | 46               |
|  | School          | 74               | 22               |
|  |                 |                  |                  |
| <b>Which contraceptive method</b>                      | Pill            | 37               | 11.2             |
|  | inject able     | 257              | 77.9             |
|  | Condom          | 76               | 23               |
|  | IUCD            | 44               | 13.6             |
|  | post pill       | 29               | 8.8              |
|  | Tubal ligation  | 37               | 11.2             |
|  | Sterilization   | 13               | 3.9              |
|  |                 |                  |                  |
|  |                 |                  |                  |
| <b>contraceptive method used after unprotected sex</b> | Pill            | 37               | 11.2             |
|  | inject able     | 70               | 21.2             |
|  | Both            | 22               | 6.7              |
|  | I don't know    | 191              | 57.9             |
|  | Other           | 10               | 3                |
| <b>contraceptive used for permanent</b>                | Pill            | 14               | 4.2              |
|  | inject able     | 70               | 21.2             |
|  | Condom          | 34               | 10.3             |
|  | IUCD            | 49               | 14.8             |
|  | post pill       | 42               | 12.7             |
|  | Tubal ligation  | 98               | 29.7             |
|  | Sterilization   | 23               | 7                |
| <b>contraceptive prevent STI</b>                       | Pill            | 39               | 11.8             |
|  | inject able     | 57               | 17.3             |
|  | Condom          | 166              | 50.3             |
|  | IUCD            | 21               | 6.4              |
|  | post pill       | 27               | 8.2              |
|  | Tubal ligation  | 7                | 2.1              |
|  | Sterilization   | 15               | 3.9              |
| <b>contraceptive have equal efficacy</b>               | Yes             | 77               | 23.3             |
|  | No              | 140              | 42.4             |
|  | I don't know    | 113              | 34.2             |
| <b>Contraceptive method is better</b>                  | Pill            | 15               | 4.5              |
|  | inject able     | 68               | 20.8             |
|  | Condom          | 22               | 6.7              |
|  | IUCD            | 14               | 4.2              |
|  | IUCD            | 18               | 5.5              |
|  | Tubal ligation  | 4                | 1.2              |
|  | Sterilization   | 1                | 0.3              |

**Table 3. The association between knowledge and independent variables of respondents in Dabat high school June 2015.**

| <b>Knowledge</b>          |               | <b>Good</b> | <b>Poor</b> | <b>p-value</b> |
|---------------------------|---------------|-------------|-------------|----------------|
| <b>Age</b>                | <b>15-18</b>  | 135         | 168         | 0.719          |
|                           | <b>&gt;18</b> | 13          | 14          | 0.719          |
| <b>Religion</b>           | <b>1</b>      | 170         | 139         | 0.813          |
|                           | <b>2</b>      | 7           | 5           | 0.813          |
|                           | <b>3</b>      | 4           | 2           | 0.813          |
|                           | <b>4</b>      | 2           | 1           | 0.813          |
| <b>Educational status</b> | <b>1</b>      | 85          | 65          | 0.613          |
|                           | <b>2</b>      | 97          | 83          | 0.613          |
|                           | <b>3</b>      |             |             |                |
| <b>Marital status</b>     | <b>1</b>      | 169         | 136         | 0.287          |
|                           | <b>2</b>      | 8           | 8           | 0.287          |
|                           | <b>3</b>      | 3           | 0           | 0.287          |
|                           | <b>4</b>      | 2           | 4           | 0.287          |
| <b>Family income</b>      | <b>1</b>      | 54          | 51          | 0.682          |
|                           | <b>2</b>      | 33          | 27          | 0.682          |
|                           | <b>3</b>      | 42          | 27          | 0.682          |
|                           | <b>4</b>      | 53          | 43          | 0.682          |

As shown above the table3, there is no association between knowledge and the independent variables.

### 4.3. Attitude result

Regarding the attitude of the participant in this study 92(27.9%) have positive attitude towards the use of contraceptive and most of the participants 205(62.1%) preferred inject able contraceptive. (Table 4)

**Table 4. Attitude result of respondents in Dabat high school June 2015**

| Variable                                | Category       | Frequency | Percent |
|---|----------------|-----------|---------|
| believe contraceptive is important      | Yes            | 295       | 89.4    |
|   | No             | 35        | 10.6    |
| believe contraceptive is 100% effective | Strongly agree | 145       | 43.9    |
|   | Agree          | 99        | 30      |
| Have bad attitude                       | Disagree       | 86        | 26.1    |
|   | Pill           | 24        | 7.3     |
| have good attitude                      | inject able    | 32        | 9.7     |
|   | Condom         | 72        | 21.8    |
|   | IUCD           | 75        | 22.7    |
|   | Post pill      | 35        | 10.6    |
|   | Tubal ligation | 67        | 20.3    |
|   | Sterilizations | 25        | 7.6     |
|   | Pill           | 15        | 4.5     |
|   | inject able    | 205       | 62.1    |
|   | Condom         | 30        | 9.1     |
|   | IUCD           | 33        | 10      |
|   | Post pill      | 27        | 8.2     |
|   | Tubal ligation | 8         | 2.4     |
|   | Sterilizations | 12        | 3.6     |

**Table 5. Association between attitude and independent variables of respondents in Dabat high school June 2015.**

| <b>Attitude</b>       |               | <b>Good</b> | <b>Poor</b> | <b>P-value</b> |
|-----------------------|---------------|-------------|-------------|----------------|
| <b>Age</b>            | <b>15-18</b>  | <b>213</b>  | <b>90</b>   | <b>0.013</b>   |
|                       | <b>&gt;18</b> | <b>25</b>   | <b>2</b>    |                |
| <b>Religion</b>       | <b>1</b>      | <b>224</b>  | <b>85</b>   | <b>0.49</b>    |
|                       | <b>2</b>      | <b>7</b>    | <b>5</b>    |                |
|                       | <b>3</b>      | <b>4</b>    | <b>2</b>    |                |
|                       | <b>4</b>      | <b>3</b>    | <b>0</b>    |                |
| <b>Education</b>      | <b>1</b>      | <b>104</b>  | <b>46</b>   | <b>0.303</b>   |
|                       | <b>2</b>      | <b>134</b>  | <b>46</b>   |                |
| <b>Marital status</b> | <b>1</b>      | <b>220</b>  | <b>85</b>   | <b>0.392</b>   |
|                       | <b>2</b>      | <b>13</b>   | <b>3</b>    |                |
|                       | <b>3</b>      | <b>1</b>    | <b>2</b>    |                |
|                       | <b>4</b>      | <b>4</b>    | <b>2</b>    |                |
| <b>Income</b>         | <b>1</b>      | <b>77</b>   | <b>28</b>   | <b>0.301</b>   |
|                       | <b>2</b>      | <b>47</b>   | <b>13</b>   |                |
|                       | <b>3</b>      | <b>44</b>   | <b>25</b>   |                |
|                       | <b>4</b>      | <b>70</b>   | <b>26</b>   |                |

As shown on the above table5 there was association between attitude and age (15-18 and >18, chi square =6.129, p-value =0.013).there was no association between attitude and other independent variables (religion, educational status, marital status and family income)

## 5. Discussion

Family planning is defined by WHO as “a way of thinking and living that is adopted voluntarily upon the base of knowledge attitude practice and responsible decision by individual and couples, in order to promote the health and welfare of family groups and thus contribute effectively to the social development of a country”. The wide spread adoption of contraceptive among students is an integral component of modern development and is essential for the integration of females in to social and economic life. The present study aimed to assess the knowledge and attitude of contraceptive method among high school students to prevent unwanted pregnancy to enhance the contraceptive practices in students.

This study conducted to assess knowledge and attitude of female students of Dabat high School towards contraceptive. According to this study 182 (55.2%) of respondents has a good knowledge about contraceptive. This figure is lower when compared to results of study at Ekpoma (60%)(6) this may be due to students back ground majority of them are from rural area. When these is no access to advertisement facilitates such as radio, TV, and it is difficult for them target reproductive health education out of there aware student 37(11.2%) know pill only injectable 257(77.9%) condom 76(23%) and IUCD, (44%), post pill 29(8.8%), Tubal ligation 37 (11.2%) vasectomy 13(3.9%)

In Dessie Ethiopia 53.3% and new irregular modern contraceptive method 69.9%

Heard about emergency contraceptive but 39.9% have good knowledge about emergency contraceptive and 15.4% they ever used.(8) This shows that higher than the current study. This may be justified by the fact that the number of students who know as a method will decrease those who know only emergency contraceptive.

In this study, the main source of information is health worker 153(46%) school 74 (22%), mass media 36(10%), book 23(7%). In the study conducted at Ekpoman 17% friends, 16 % books and magazine, 10.7% internet were the main source of information.(6) This may be due to lack of open communication between friends and families, poor access to information since, most are rural students. According to this study only 92 (27.9%) of the respondents have good attitude towards contraceptive compared to the study at Bahri Dar 50% have good attitude towards contraceptive.(10)

This figure shows respondents (current) study do not favor the widely distribution of contraceptive due to religion and socio cultural backgrounds.

## **6. Limitation**

As a result of cross-sectional study design is used in this study cause-effect relationship cannot be determined ,further more reproductive health information are sensitive by their nature so that social desirability bias cannot be completely ruled out.

## **7. Conclusion**

Generally most of Dabat district high school students have good knowledge but their attitude towards contraceptive use for prevention of unwanted pregnancy is poor, also there is no relation between most of independent and dependant variables.

## **8. Recommendation**

Based on the findings of the study those recommendations are given

### **✓ To health policy makers**

School based reproductive health education need to be incorporated with curriculum and integrated with local health departments so that health professionals would have constant session to disseminate factual information to build knowledge and attitude on the use of contraceptive for prevention of unwanted pregnancy and break misconceptions toward contraceptive use among high school female students.

### **✓ To Dabat district high school administration**

To enforce up on and strive to establish and strengthen reproductive health club that will increase student's knowledge and attitude of different family planning method and uses.

### **✓ To mass media**

Death from unsafe abortion following unwanted pregnancy is one of the burning issues of reproductive health so, the media is better to work on the use of contraceptive for prevention of unwanted pregnancy among high school female students by programs like dramas, poems and by inviting health professionals to give health education about contraceptive use.



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## 10. Annex

### Annex-I: Verbal consent

#### Greeting

How are you? We are a student of University of Gondar College of medicine and health science department of public health officer. We are conducting a study on knowledge, attitude and Practice of contraception use to prevent unwanted pregnancy. This will help us to improve the access of contraception, awareness creation about it based on your answers to our questions. Your name will not be written in this form and will never be used in connection with any information you tell us. All information given by you will be kept strictly confidential. Your participation is voluntary and you are not obligate to answer any question you do not wish to answer. IF you fill discomfort with the questionnaire, please fill free to drop it any time you want. This questionnaire will take about 30 minutes.

Data collectors Name\_\_\_\_\_ signature\_\_\_\_\_

Date of Data collection\_\_\_\_\_

Result of data collection:

1. Completed
2. Refused
3. Partially completed

Checked by\_\_\_\_\_

## 10. Annex

Questionnaire for assessment of Female high school students' about Knowledge, Attitude, and Practice about Contraceptives Dabat District, Northwest Ethiopia.

| S/No | Question                                      | Response   |
|------|---|--|
| I.   | <b>Socio-Demographic information</b>          |  |
| 1.1  | How old are you?                              | _____  |
| 1.2  | Religion                                      | 1. Orthodox<br>2. Muslim<br>3. Protestant<br>4. Catholic<br>5. Other (specify)_____    |
| 1.3  | What grade are you?                           | 1. 9 <sup>th</sup><br>2. 10 <sup>th</sup>  |
| 1.4  | What is your current marital status?          | 1. unmarried<br>2. Married<br>3. Divorce<br>4. Separated                               |
| 1.5  | With whom are you living now?                 | 1. With father and mother<br>2. With friends<br>3. Alone<br>4. Other (specify)         |
| 1.6  | Mother's educational level?                   | 1. No studies at all<br>2. Read and write<br>3. Grade 1-12<br>4. Other, (specify)_____ |
| 1.7  | Father's education level                      | 1. No studies at all<br>2. Read and write<br>3. Grade 1-12<br>4. Other, (specify)_____ |
| 1.8  | What is your family average income per month? | 1. 200 – 400birr<br>2. 400 – 600birr<br>3. 600 – 800birr<br>4. >1000 birr              |

| <b>Knowledge towards contraceptive</b> |   |   |
|--|---|---|
| <b>2.1</b>                             | Have you heard of contraception   | 1.Yes<br>2.No   |
| <b>2.2</b>                             | If your answer for Q 2.3 is yes, from where do you heard?                             | 1.Reading from leaflets<br>2.Mass media<br>3.Health workers<br>4.From school  |
| <b>2.3</b>                             | Among contraceptive methods which once do you know?<br>Multiple answers are possible. | 1.Pills<br>2. Injectable<br>3.Condoms<br>4.Intar uterine device (IUDS)<br>5.Emergency contraceptives(EC)<br>6.Tubal ligation<br>7.Vasectomy |
| <b>2.4</b>                             | What type of contraception can be used in an emergency after sex?                     | 1. Pills<br>2. Intra uterine device (IUCD)<br>3. Both<br>4. Don't know<br>5.Other, (specify)  |
| <b>2.5</b>                             | Which contraceptive method can be used as permanent prevention of pregnancy?          | 1.Pills<br>2. Injectable<br>3.Condoms<br>4.Intar uterine device (IUDS)<br>5.Emergency contraceptives(EC)<br>6.Tubal ligation<br>7.Vasectomy |
| <b>2.6</b>                             | Which contraceptive method can be used as prevention of sexual transmitted diseases?  | 1.Pills<br>2. Injectable<br>3.Condoms<br>4.Intar uterine device (IUDS)<br>5.Emergency contraceptives(EC)<br>6.Tubal ligation<br>7.Vasectomy |
| <b>2.7</b>                             | Do you think all contraceptive have equal effect for prevention of unwanted pregnancy | 1. Yes<br>2. No<br>3. I don't know  |

|            |  |  |
|------------|--|--|
| <b>2.8</b> | If your answer for q 2.7 is no which do you think is more effective? | 1. Pills<br>2. Injectable<br>3. Condoms<br>4. Intrauterine device (IUDS)<br>5. Emergency contraceptives(EC)<br>6. Tubal ligation<br>7. Vasectomy |
|------------|--|--|

| <b>Attitude towards contraceptive</b> |  |   |
|---------------------------------------|--|---|
| <b>3.1</b>                            | Do you believe that contraceptive is important?                      | 1. Yes<br>2. No   |
| <b>3.2</b>                            | Do you believe contraceptive are effective for prevention pregnancy? | 1. Yes<br>2. No   |
| <b>3.3</b>                            | For which type of contraceptive do you have bad attitude?            | 1.Pills<br>2. Injectable<br>3.Condoms<br>4.Intar uterine device (IUDS)<br>5.Emergency contraceptives(EC)<br>6.Tubal ligation<br>7.Vasectomy |
| <b>3.4</b>                            | For which type of contraceptive do you have good attitude?           | 1.Pills<br>2. Injectable<br>3.Condoms<br>4.Intar uterine device (IUDS)<br>5.Emergency contraceptives(EC)<br>6.Tubal ligation<br>7.Vasectomy |